(July 2000)

Political Organization Notice of Section 527 Status

OMB No. 1545-1693

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Name of organization	lichela M. A.	C	Employer identification number
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1419 Hamiral	LUr		54-1998722
City or town, state, and ZIP coo	(///)		
E-mail address of organization	VH 22192		
Michele @ Mc	quiaq.com (con	itact person's el	mail)
1 /	45 Custo	odian's address [
Michele B Mc	Brice 1.15	415 Admiral D)r
- Pribacle Dillo	Cuigg [Voodbridge VA	27102
Name of contact person	5b Conta	act person's addréss	22172
M: LL RM	David I	415 Homisal	Ur
Michele B Mc	Vulge V	Nordbridge VI	A 22192
Business address of organization	n (if different from mailing address	shown above). Number, street,	and room or suite number
City or town, state, and ZIP code			
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Purpose			
Describe the purpose of the orga	anization 1	1 11 10 11	ouse of Delegate
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List of All Officers, Directors, and Highly Compensated Employees (see instructions)		
lame	9b Title	9c Address
10 0 . 0		
none		
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